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ABSTRACT

This paper describes the approaches being taken in 11 school districts that are located in California, Nevada, and Arizona to help disadvantaged newcomers within the districts, contrasts these approaches, and relates them to achievement-gain scores. The study's objective is to gauge whether school districts that were classified as high performers, stable performers, and low performers by their achievement-gain scores between 1984 and 1990 provide different types of service programs for disadvantaged newcomers to the district. Descriptions of the school districts are followed by detailed examinations of three types of programs: social services, health services, and psychological services. An analysis of other service programs intended to enhance the lives and growth of children and their families is also reviewed. It is reported that all these schools districts are experiencing increasing poverty and family problems. While some communities are making efforts to meet these problems and find solutions, stable districts and their communities do not appear to place a high priority on providing services to children and families. Very little effort is shown to exist in low-performing districts. Data suggest both quantitative and qualitative differences in the services provided to the children and their families in high-performing and low-performing school districts. Information tables provide a summary of the four types of service programs for high-performing, stable, and low-performing school districts. (Contains 10 references.) (GLR)

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A Comparison of Urban School Districts' Health and Human Services

by

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Introduction

We all share the view that "children have physical and emotional security needs that must be met before they are free to concern themselves with anything else, including doing well in school." (California Task Force, 1992, p. 87). However, there is no clear consensus on how best to organize services, that is, where and under whose auspice. One view is that meeting these needs is the obligation of the family and nonschool agencies. Another is that schools are the ideal place to meet a very wide range of these needs. The middle ground is that coordinated linkage between schools, families, and other agencies offers the best solution.

In school districts impacted by very large numbers of severely disadvantaged newcomers, this policy question may persist. Currently, few within those districts will disagree with the proposition that public schools are *very heavily involved* in the task of meeting a wide range of pressing needs that are not cognitive learning needs. In the conviction that schools are the most logical setting, the California Task Force (1992, p. 87) adopts "a philosophy of risk prevention and a vision of the schools as a hub for a coordinated multiagency response." Local, state, and federal agencies, as well as philanthropic organizations, give funding to a wide variety of agencies whose service programs for children and youth are seldom coordinated or integrated with one another. Therefore, schools have the challenge of harnessing and enhancing the quality of existing programs, and without duplicating these programs, successfully linking them with the school lives of students.

Programs nationwide are beginning to adopt holistic approaches to the needs of children. The U.S. Administration for Children, Youth, and Family awarded 32 grants in 1992 for three- to five-year demonstration projects. These projects are designed to develop collaborative strategies that would strengthen the connection between Head Start services to children and parents and extend them into the primary grades. The goal is to provide continuity and comprehensiveness in the delivery of a wide range of services that go beyond academic instruction (Jang & Mangione, 1994).

The Healthy Start Support Services for Children Act (Senate Bill 620) is an example of a recent effort made by the state of California to support and encourage early prevention and intervention programs for children. The goal of this initiative parallels the federal programs. That is, to establish a comprehensive statewide system of school-linked

services for children and their families, based on the belief that the school is the best setting for coordination.

At the local level, one of the more prominent efforts is being undertaken by Los Angeles Unified School District. As part of the community consensus developed by over 600 community representatives, the district has created a Social Services Council at the district level with schools in order to strengthen collaboration between schools, public service agencies, and private organizations.

For all children and youths, but most crucially for the disadvantaged, the scope and quality of services—social, health, psychological, and other—are as relevant today as are the organization and delivery of academic achievement. The 11 sampled school districts from California, Arizona, and Nevada described in this paper are localities that experienced large demographic and multiethnic changes and were heavily impacted by adverse health and crime trends during 1980's. State profiles contained in the *Kids Count Data Book* (Center for the Study of social Policy, 1992) indicate that trends in children in poverty, percentage of children living in single-parent households, and percentage of all birth to single teens worsened between 1980 and 1990 in the aforementioned states.

The assumption in collecting these data for the study was that the quality of treatment of disadvantaged newcomers within a district and its schools depends not only upon educational programs but also upon how instruction itself interacts with noneducational services. Such services can nurture and sustain well-being and thus contribute substantially to cognitive development.

Objective of Paper

The purpose of the paper is to describe the approaches being taken in the 11 sampled school districts, contrast these, and relate them to the achievement gain scores. The objective is to gauge whether school districts classified as high performers, stable performers, and low performers by their achievement gain scores between 1984 and 1990 provide different types of service programs.[1] In this paper, descriptions of the school districts are followed by the detailed examination of three types of programs: social services, health services, and psychological services. Following is an analysis of other service programs intended to enhance the life and growth of children and their families.

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[1] High performers are the school districts with large increase in test scores. Stable performers are the school districts with little or no change in test scores. Low performers are the school districts with large decline in test scores.

Descriptions of the Districts

The following sampled school districts were visited and researched in depth. Pseudonyms are used here to protect the identity of the school districts.

Termino, located within Phoenix and Maricopa County, enrolls approximately 2,300 students in grades K-8. Half of the students are ethnic minorities: 33% Hispanic, 12% African Americans, and 6% Native American and Asian combined.

Kennedy, located within Phoenix and Maricopa County, enrolls about 6,200 students in grades K-8. Some 79% of those enrolled are ethnic minorities: 72% Hispanic, 6% African-American, and 1% other minorities. Kennedy is one of the oldest and poorest school districts in Arizona. Within the past decade, its student composition has changed from 70% Anglo to about 70% Hispanic.

Desert View, located in South Tucson, enrolls about 13,800 students in grades K-8. Some 65% of the student body are Hispanic, 3% African American, and 4% Native American or Asian.

Washington, located in San Jose (one of the largest cities in California), enrolls nearly 10,000 students in grades K-8. Nearly 90% of its students are ethnic minorities: 55% Hispanic, 25% Vietnamese, and 10% others. It experienced a large increase in poor and LEP students from 1980 to 1990.

Tumbleweed, one of the largest K-12 districts in California, enrolls more than 70,000 students, 36% of whom are Hispanic, 21% Asian, and 10% African-American. It is located in the Central Valley.

Dominguez Hills, located in California in the Wilson Valley near the foothills, enrolls nearly 9,000 students in grades 1-8, 90% of whom are Hispanic and 5% Asian.

Bayside, located in the metro area of San Diego, California and about 10 miles above the Mexican border, enrolls about 6,000 students in grades 1-8, 68% of whom are Hispanic and 13% Filipino. Nearly half of the district's students are LEP, which represents a 50% increase over the past decade. Over 90% of its students are minority.

Valley View, located in the west central portion of the San Gabriel Valley, 10 miles east of Los Angeles, California, enrolls about 3,000 students in grades 1-8, of whom 53%

are Hispanic, 32% Asian, 10% Native American, and 4% other minorities. Valley View currently hosts students from 18 different language groups.

Wilson, adjacent to Valley View, enrolls nearly 3,500 students in grades K-8, 43% of whom are Hispanic, 30% Asian, and 4% other minorities.

Jefferson County School District, one of two major metropolitan areas in Nevada, enrolls over 120,000 students in grades K-12, 14% of whom are African American, 13% Hispanic, and 5% other minorities.

Roosevelt County School District, one of two major metropolitan areas in Nevada, enrolls about 40,000 students in its grades K-12, 11% of whom are Hispanic, 4% Asian, 3% Native American, and 3% other minorities.

Social Service Programs

Central and pivotal as school life may be, children in the far West spend less than one fifth of their hours each week in school during the school year. Those who are not in a year-round school have another three months without school contact. This out-of-school time brings children and youth into contact with many other social institutions and agencies imbedded in their communities. We asked many questions during our field research about how district school staff related to those agencies.

High-performing Districts

School-community collaboration is generally very harmonious, continuous, and supportive in the high-performing districts. Public schools are generally treated as being integral to their communities, and collaboration between agencies across the communities is very extensive and deep. Community officials, school administrators, teachers, and parents assert that they "enjoy a sense of togetherness" in their shared commitment to help children fulfill their cognitive, emotional, social, and physical potential. For the most part, our informants in these districts did not report divisions or tensions along racial, ethnic, or other lines. Mayors, city council members, and other civic leaders often are involved with the staff members of these school districts, and the well-being of children seems to be a concern shared across civic, commercial, and other organizations.

High performing districts tend to maintain close working relationships with social workers and the police. School district staff members exhibit alertness to needs and danger

spots which generates a stance of anticipation and prevention. Hence, various preventive programs are provided for students, with special emphasis being placed on personal safety practices and the building of self-esteem.

Kennedy. Kennedy School District provides hot breakfasts and coordinates clothing and school equipment donations from retirement communities in the surrounding county. Retirees bring in great quantities of clothing, help prepare it for use, and stay on to mingle with and share in the lives of the primary schoolchildren. Kennedy schools also have strong safety and security operations and exercise strict disciplinary control, particularly at the junior high school, in order to prevent the penetration of drug and gang operations. A police officer works full time in the junior high school.

Valley View. Valley View, like the Phoenix neighborhood surrounding Kennedy, is experiencing the widespread influence of gang recruitment, gang fights, and drug trafficking. During each successive year of the 1980s, growing numbers of babies were born with prenatal addiction to several varieties of narcotics, and increasing numbers of children are neglected and abused each year. A school social worker receives many referrals from principals, nurses, and teachers through a communitywide hot line. She feels strongly that Valley View badly needs its own police department in order to meet rising numbers of crime incidents, although she and others also noticed that the county sheriff's office had some members who did their best to help schoolchildren. Several respondents, for instance, spoke admiringly of a dedicated Hispanic woman deputy sheriff who visits schools and classrooms regularly and conducts discussion sessions with students on how to avoid drug use and to build self-esteem. The Valley View schools also have recently instituted a dress code intended to prevent symbolic displays of gang colors and articles of clothing.

Bayside. The Bayside public schools enjoy strong support and cooperation from the city's mayor, city council members, and officers of the Chamber of Commerce. Our evidence suggests that these officers collaborate very effectively with the superintendent and principals, and they in turn are in close communication with the police, fire, and other departments of the town government.

Bayside's town government funds a full-time police presence in the schools and an officer regularly conducts the DARE drug education program. The police and a community service clinic work in close tandem with the district administration trying to prevent and control gang violence and drug trafficking. Bayside and its schools sponsor the Juveniles

Out of Gangs (JOG) program—a drug prevention project involving fifth graders. Students and parents participate in antidrug conferences, classes, and in an after-school club run by a teacher. Bayside's school administrators also work with the local government to establish what they call "drug-free zones," which cover a 1,000-yard radius around each school and are patrolled to preserve them as protected against drug use or dealing. City and police officials also expressed pride, incidentally, in their agencies' efforts to improve minority group representation in their workforces.

Stable Districts

In districts where little or nor change occurred in achievement scores, only very limited social services are available in the schools or through community agencies. We do not think this situation can be accounted for by limited resources. Rather, the communities served by these districts have political factionalism and racial/ethnic tensions separating groups within them, with a resulting lack of concern about the needs of ethnic and language minority newcomers.

For instance, in Termino, a part of Phoenix, a social worker spends one day a week in the schools and four days a week in other public districts in the county. Occasionally she works with the district's school psychologist and the two of them might visit a student's home. State police officers make an annual presentation to each Termino school on issues related to youth gangs. The district also sponsors a confidential drug dependency support program that makes referrals for children from homes with chemically dependent family members. Teachers involved in this program are given in-service training to equip them to participate with family members.

Termino also operates a day care center that requires most families to pay for services. Some local businesses donate funds to Termino schools for special purposes such as youth summer jobs. However, the activities we have described are very limited, and yet the full range of available social services for children are linked with the schools.

Low-performing Districts

Districts whose test scores deteriorated were found to suffer from racial and intergroup tensions grounded in mutual distrust. For the most part, these districts and their corresponding communities have not made the investments needed to mount and maintain social services adequate to ameliorate the difficulties faced by disadvantaged students.

Relations between social workers and school staff are unclear, strained at times, or nonexistent, and social workers appear pessimistic about meeting the needs of children and their families in these communities.

Tumbleweed. As we have noted elsewhere in this report, Tumbleweed is one of the poorest metro areas in the nation, based on the number of families living below the federal poverty level and receiving AFDC assistance. Although many children in Tumbleweed suffer from various forms of abuse and neglect, there are no child abuse prevention programs there, except for a hot line to report the severest cases. In addition, the city experienced rising crime and delinquency rates during the 1980s, at levels that exacerbated tensions between the diverse ethnic subcommunities. School staffs report that they lack the resources to address student needs, and they express skepticism about their ability to help. Social workers report that they get very few referrals from the schools, and those they do receive are limited to conditions mandated under law to require reporting. However, they do sometimes receive calls from school staff people asking them to help present in-service training on child protective service policies and practices. There also is an effort within the Tumbleweed school district to provide translators and culturally sensitive staff during sessions with language minority newcomers and their families.

Desert View. The low performers all acknowledge long-standing problems with gangs, and yet they have made few organized efforts to deal with these problems. They either ignore or deemphasize gang problems. Desert View District staff members report severe gang problems in and around their campuses, for example, but they and their community leaders are not doing much that we could see to control gangs, except that every year sixth graders are shown a half hour film on gang prevention. The schools lack security officers and gang protection procedures. One security guard is assigned to protect the 1,200 students in the junior high school.

Wilson. Wilson shows some concern over the increasing frequency and severity of crimes committed on campuses. The district has implemented security measures to control crimes after a teacher was assaulted on a campus. Visitors to Wilson schools are required to wear passes from the district office before they enter a campus, and a dress code is enforced to discourage students from flaunting gang colors and other clothing symbols. These efforts are not preventing the crimes that occur almost daily, however.

Dominguez Hills. Unlike the other low performers, Dominguez Hills has close ties between city, county, and school health and social service agencies. There is good

community support for the public school, and community members are supportive of the safety and well-being of all children. Several programs are in operation to prevent students from becoming involved with drugs, alcohol, or gangs, for example. The police work cooperatively with Dominguez Hills' school staff and students and contribute strongly to workshops and training about drugs and alcohol, truancy, and child abuse. Students also get opportunities to take internships in local businesses. In addition, the health center provides work experience to selected students for 10 weeks under a program designed to motivate at-risk students and to get them out of harmful situations.

The children and families of Wilson can count on some support from the schools, businesses, and community agencies. There is, for example, a child development program providing activities and snacks for low-income children both before and after school every day. Several of the low-performing districts have one or two distinctive program efforts going on to provide child and youth social services of very limited kinds.

Health Service Programs

Nutrition and physical well-being of children should be a primary concern for educators. Hungry, weak, and ill children cannot learn to their fullest potential. As stated in the California Task Force Report (1992), "The Community Childhood Hunger Identification Project" estimates that 647,000 children in California are hungry. Only 33% of the children receiving free or reduced lunches also are provided with a school breakfast. This report from the California Department of Education acknowledges the importance of meeting the nutritional and basic health needs of children and their families. However, due to severe budgetary reductions and a general lack of resources, many school districts and communities are experiencing great difficulties in providing the necessary services and programs to children and families. More doctors, nurses, counselors, and therapists are needed to help the children and families in need. Home, school, and community should be partners and share responsibility to ensure that every child and family in need are receiving proper services and treatment. Health agencies should have translators available or have bilingual staff for families who have difficulty in communicating with English. Positive attitudes, commitment, and caring from schools and health service providers can greatly enhance the quality of services provided to children and their families.

High-performing Districts

The high-performing school districts and their communities have more programs and health services available to families and their children. In general, there also is good cooperation and communication between teachers and health service providers in these school districts.

Kennedy. At Kennedy, teachers are helped by a social worker, a nurse, custodians, and an itinerant counselor. The district has a mental health team, and a full-time nurse responsible for vaccinations and medical and dental assistance.

Valley View. Valley View has a paramedic squad to respond to emergency situations. The city has two mental health hospitals, three health centers, and two county health clinics in nearby cities. A team called the Refugee Assistance program provides translators to help Asian families in the health clinic. The clinic has several Asian and Filipino nurses who also serve as translators if needed. The health center receives referrals from a school nurse regarding immunization. The school nurse and health providers in the community have good communication and work collaboratively. They meet every year to discuss issues relating to immunization and TB screening, and children get immunization before entering school through the Back to School Rush Program. The district emphasizes the children's well-being and physical activities. The medical center in the community is the district's partner in funding the new PE curriculum. Through a grant, Valley View was able to provide in-service training for staff, establish an indoor fitness program, and provide access to a consultation hotline.

Bayside. Bayside School District is experiencing a shortage of nurses due to budget cuts. Two nurses provide services to 10 schools. They provide vision and hearing screening tests for students, make referrals to health agencies, and assist in implementing a school policy on immunization and the Child Health Disability Prevention Program with the Health Department. They also provide health materials, medical findings, and other useful information to parents and teachers, assess students' health, report child abuse, and give first aid in-service training to the staff. The community health clinic, with three doctors, including two pediatricians, one physician, and one physician assistant, provides services to families and children. It has its own pharmacy laboratory. It should be noted that all the staff members at the health clinic are bilingual. Hispanic parents who do not speak English are easily served in Spanish. The members of the clinic give presentations on adolescent health to schools and provide one-on-one counseling for children who are obese. The clinic sends flyers once a year to the community to make sure that children are getting their

immunization shots and provides general physicals for sports activities. The clinic also provides free immunization shots and various screenings such as hearing, vision, and blood pressure to families and children in the community.

Stable Districts

There is generally a lack of cooperation between these districts and the county health department, with only limited medical services available to the school children. Few local agencies at Termino provide community health and safety workshops, for instance.

Roosevelt. A serious lack of primary medical care in the Roosevelt County community makes it difficult for families to have a health plan or receive Medicare benefits. Many of them do not have any health plan or Medicare at all. Two school nurses spend one or two days a week at each school, and a health aide helps with routine first aid. Immunization is available through the county clinic. However, there is some community effort and involvement to improve the services to children and families. In the past six years, through a private nonprofit organization involving public officials and business leaders, Roosevelt has attempted to address its children's needs and to fill in the gaps between existing services to its children. Its offerings in health services include a teen clinic. The teen clinic offers various services of particular importance to teens, including pregnancy testing and counseling, birth control, and general checkups. A child's shelter and companion teenage shelter were built recently. Efforts in the nonprofit cabinet also include prevention, mainstreaming, and coordination of existing services to facilitate and improve access for families in need, and the development of additional services for children and families based on documented community needs. The cabinet also established an independent Family Resource Center. The Roosevelt County Medical Center works with the schools to help students who are interested in allied health.

Low-performing Districts

The health services provided to the children and families in these school districts are very limited, and no detailed description of services was obtained. This may be due to the uneven distribution of topics covered during the visits. Families and children in Wilson are provided health services and counseling through three community medical, family, and health centers. No detailed description of practices and programs was found. Community members at Desert View pay whatever they can afford for basic health services offered through the mobile health clinic that stops by the park regularly. Dominguez Hills has a

Primary Prevention Program in grades K-3, with all incoming kindergartners given physicals. A nurse and health aide provide services to the schools, and a few volunteer teachers are involved in the immunization program so that mothers can get their toddlers immunized. A health coordinator in the district works with the health clinic in the city, and families who do not speak English are served through an interpreter program in the clinic.

Although Tumbleweed has experienced a large enrollment increase over the last decade, the number of school nurses has not increased. Thus, nurses in the district provide only limited mandated services to the children, such as hearing examinations. Our research found: (a) a lack of health education programs provided to the children and families even though many health problems (such as a very high rate of teen pregnancy) exist; (b) a lack of communication and cooperation between the schools and the county health clinic, with the clinic getting few referrals from the schools; and (c) a limited outreach effort from a county clinic to the schools. The clinic does provide immunizations and physicals to school children, gives presentations, and participates in health fairs, however. It has a small bilingual staff for the Hispanic population, but none for the Southeast Asian population. The poor and minority populations in the community are not getting the proper medical services that they need. A good indication of this is that there is a general shortage of health professionals in the area, and fewer and fewer doctors are willing to accept Medi-Cal patients.

Health Services and Their Impact

A few patterns are observed as the school districts are viewed by the three types of achievement change. Overall, the high-performing school districts such as Valley View and Bayside have well-established immunization and health education programs that target the population most in need of such services. The local health agencies and health providers demonstrate sensitivity and recognize the importance of providing health services to all the children and families in need, including the multilingual minority population. Bayside School District, with its local health department, is a good example of such exceptional efforts. Its community health clinic is staffed adequately with bilingual professionals. In addition, nurses in these school districts provide a broad spectrum of health services ranging from making referrals to assisting teachers and parents. Local health clinics also are exerting an effort to make parents aware of the importance of health-related issues.

On the contrary, there is limited health care in the stable districts, and medical services are generally nonexistent in the low-performing school districts. Because schools and districts cannot provide comprehensive health services to the children and families, the alternative is to establish ongoing and mutually supportive efforts with the health agencies. As is evident with the social services, the districts with little change and especially the low-performing districts have failed to integrate themselves into the social fabric of the community and to establish cooperative links with the other agencies. Dominguez Hills is an exception in this regard, and its position in the low performing category could be due to other confounding factors.

With regard to special education, no differences were found in the noneducationally focused services provided to children in these high-performing and low-performing school districts. Kennedy has yet to give some priority to special education, including more resources. However, Kennedy and Valley View have speech therapists; in particular, Valley View has an Asian speech therapist to meet the needs of the district's 33% Asian student population. Through the Resource Specialist Program, children with special needs are building their self-esteem. Special education students at Dominguez Hills participate in various sporting events, in which community volunteers and district staff also participate.

A key to the success of any district in this domain lies in collaboration and integration with the existing health services in the local government and the implementation of a comprehensive preventive health program including immunization and health education. The conclusion is that high-performing districts are more innovative and more cooperative with clearly established goals for their children and therefore proceed to establish stable and long-term efforts with the local health agencies and the community.

Psychological Service Programs

Disadvantaged newcomers often are in extreme need of help with the emotional and psychological stresses generated in their daily lives. Accordingly, it is important to note that family policies, and issues of family well-being, are affected powerfully by resource allocations from federal, state, and local governments (Zimmerman, 1992). The fact that there is a lack of a clear set of priorities and policies at all levels has left many school districts uncertain about how to provide psychological services to students.

The main difference in providing psychological counseling services lies in the amount and effectiveness of the services available to meet the needs of students who actively seek help,

especially concerning problems with gangs, drugs, alcohol, and abuse. In most of the school districts we visited, staff complained there was not enough counseling time or psychologists.

High-performing Districts

In school districts with improving test scores, more extensive counseling services and programs (such as peer counseling at Kennedy) are available than in low-performing districts. Various community organizations are involved with schools improving psychological counseling services to children and their families.

In the high-performing school districts, students are reportedly treated with care, respect, affection, and socializing attention by adults. Students appear cheerful, enthusiastic about being in school, and feel safe in school.

Kennedy. Kennedy focuses on the equitable and sensitive treatment of children. When fights and quarrels occur among students, the adults immediately intervene to prevent their escalation. Students discuss interpersonal problems and seek guidance freely. At Kennedy, social trust is high. Kennedy also maintains two full-time psychologists who work with children from all elementary schools on an individual basis and in long-term group sessions. They also refer students and parents to other mental health agencies.

Valley View. Valley View has several community counseling agencies working with the district free of charge and has increased the number of counselors and psychologists to meet the needs of students. Four psychologists provide services to five schools and hold a positive attitude toward changes taking place in schools and the community. One bilingual counselor also is helping students, mainly Hispanics. Different community organizations are providing counseling and family education classes. The Asian Pacific Counseling and the Asian Youth Counseling Centers are providing counseling and homework assistance to the district's Asian population. Another example is the Juvenile Diversion Program, which helps students build self-esteem and provides counseling and plans lessons once a week to help students avoid getting involved with gangs. At Valley View, there are some racial tensions among children, which is evidenced by name calling, however, the tension is usually resolved by teachers and counselors through discussions and lessons.

Bayside. The school psychologist at Bayside assists students in testing and counseling, consults with school personnel and parents regarding children with learning social, behavioral, and/or emotional difficulties, and makes recommendations for

intervention. Good cooperation and communication between teachers and the psychologist exists. The psychologist gets referrals from teachers about drug-related abuse and receives phone calls often at night from teachers who are concerned about children, who have problems related to drug and gang issues. The school psychologist also serves as a liaison between the school and other school-related community services and agencies, and coordinates the delivery of service for children requiring psychological intervention. One community agency is helping schools and children from Asian communities by providing counselors and translators to the schools.

Stable Districts

To some degree, it has been found that school districts whose test scores have remained stable are working cooperatively with their communities and the different service agencies to provide psychological services to families and children.

Roosevelt. This is especially so in the Roosevelt School District. A central referral team, consisting of members from different community agencies, provides services in referral and family counseling, and coordinates needed services for children and families. The police department cooperates with the school attendance officers on truancy cases. The School Early Intervention program assists elementary school children and their families through counseling, liaison, and coordination of services and parenting classes. Ten school psychologists in Roosevelt do testing and some counseling, and consult with school personnel and parents regarding children. A school counselor serves as case manager for special education referrals, reports child abuse, and consults with teachers and parents. The counselor also provides individual, small group, and large group counseling, and conducts parent classes.

Termino. Termino has a school psychologist who makes referrals to a social worker, and follows up with home visits to troubled families with a social worker or an ESL teacher. The school psychologist also works with the special education teachers and tries to help children with emotional or learning disability problems. Students receive counseling through the school counseling program, which is funded through federal drug programs. The majority of the issues dealt with are related to dysfunctional homes and traumas such as the imprisonment of a parent or a sibling. To motivate children, role models and professionals are invited from the community to give talks to the students.

Low-performing Districts

School districts whose test scores deteriorated were found to lack counselors and psychologists to meet the growing needs of students and their families. No community agencies are working with schools to provide counseling services. The efforts being made by these school districts are minimal at best. A licensed clinical social worker in Tumbleweed spends only eight hours a week counseling students with emotional problems that teachers are not trained to handle. A half-time, school-based elementary counselor in Desert View works with children who come from broken, abusive, and violent family backgrounds to prevent behavior problems. In addition, the counselor resolves conflicts and conducts sessions for teachers. The police department in Dominguez Hills offers a counseling program to families with problems such as drug abuse. However, very few slots are available for appointments, and families often are placed on a long waiting list.

Concern over a number of hate crime incidents among students and communities is growing, and more and more students are carrying guns and knives to school. However, these districts generally do not have a hate crime policy. Policies to prohibit children from engaging in hate activities have yet to be instituted in the schools. The mechanisms for resolving these incidents are very limited, and no counseling or parent education on these issues is provided at the school and the community level even though the community and the district acknowledge that the racial tension between different ethnic groups will likely reach new levels of seriousness. Dominguez Hills has a conduct code and rules for dealing with fighting, playing safely, and general behavior.

Students from Tumbleweed are treated differently than from those at high-performing districts. Research shows that more minority students are expelled than Anglo students, and teachers refer more minority students for suspension or expulsion than Anglo students. Many of the teachers are ignorant about their students' backgrounds, unlike the teachers in high-performing school districts where the teachers often know their students by their first names.

Other Service Programs

Although social, health, and psychological problems dominate the concerns of school districts, there are other types of service programs whose impacts are less immediate, but are nonetheless important. These programs often are preventive and nurturing in nature. They often serve to build long-term structural improvement and good will among the key

constituents in a district such as the school personnel, community members, and parents. Educational programs, English adult courses for parents, communication and translation assistance, cultural programs to recognize diversity, and park and recreation programs are examples that help weave a fabric of richness in a district (Harry, 1992). Many of these programs come from the commitment of the community and district rather than being contingent upon funding resources. Most of the school districts recognize their importance and promote various ways in which the lives of children and their families can be enriched.

High-performing Districts

Parent involvement and parent education are critical elements in any program whose goal is to enhance children's well-being and success rate. Districts and schools must provide various opportunities for parents to get involved in their children's education. Communication with parents in their language in ways that facilitate their input and encourage their participation can enhance the children's educational process. Most school districts in the study have translators or interpreters available, but not all the time. However, the availability of translators for meetings and events was more apparent in the high-performing school districts. Also, they have several programs to educate parents about social issues such as gangs, drug, and health.

Kennedy works closely with parents on social, teaching, and learning programs available to them. Adult literacy training, GED instruction for parents in the evening, and a variety of cultural events, fairs, and extended field trips are offered to parents and children at Kennedy. Parents at Valley View are being educated about gangs through the DATE program. The Parent Taught Program educates parents of two and three year-olds on better parenting skills. Parents with newborn babies at Bayside are being educated through a program called Parents as Teachers. The program helps parents get their children off to the best possible educational start in life, and many parents are benefiting from the program. The community also recognizes the importance of educating parents on health issues because many parents fail to appreciate why children need to be vaccinated. The health educator gives presentations and sends out notices to parents about immunization and other health related issues.

Although all school districts attempt to provide their students with nonacademic activities, their nature and variety of these activities differ greatly. The high-performing school districts have a greater variety of activities and programs to develop children's social skills, self-confidence, and self-esteem. There are numerous extracurricular and after-

school activities in these school districts. Some of the after-school activities include choir, art club, drama club, marching band, drill team, and the Kiwanis Builder's Club, which is a service club to the school and to the community.

High performers have good park and recreation programs. For example, the YMCA at Bayside provides many sports and crafts classes to youngsters to get them off the street and keep them out of trouble. A television program called "Children's Line" on a local channel gives opportunities to children who are at home alone to call the line and talk to someone, because there is an increasing number of children from single-parent homes. Valley View has a community center where children participate in activities such as dance programs and sports programs. Kennedy also shows great enthusiasm for sports and emphasizes physical education with a large gymnasium to support its program. Students also participate in activities such as band and choral events.

There are library programs for children in these communities. The community library at Valley View operates children's summer reading programs. However, it should be noted that Wilson library, one of the low-performing school districts, also has Friday Readings, a summer reading program for children, and special Saturday events for families.

Stable Districts

In Roosevelt, a nonprofit organization offers parent education classes. Parents are provided with information about different classes all of which are free—some in Spanish—through a Parent Education Network Hotline. There are several after-school programs and extracurricular events available to the students at these little-change school districts. These activities include sports, band programs, chorus, and special interest clubs. The students' level of participation in such activities at Termino is high, because late busses are available.

Low-performing Districts

School districts whose scores deteriorated also offer some events for parents. They include workshops on topics such as self-esteem, drug and alcohol awareness, health and wellness fair, and an antigang information guide. However, in these districts most parents do not get involved with their children's education, and the schools do not have resources to develop programs that respect and accommodate parent's work schedules and provide child care. Tumbleweed, with a more than a 50% Hispanic student population, has few staff

members in the district office who speak Spanish. To address the growing problem of teen pregnancy, Desert View has the Teen Parenting program, which encourages teen mothers to take courses before and after the birth of their child. Topics such as self-esteem, social development, suicide prevention, substance abuse, and the risk of gang involvement are being offered to parents in Dominguez Hills .

There are very limited after-school activities, because schools have no means of ensuring the safety of their students after school and while going home. Due to limited funds and resources, these school districts cannot provide after-school busses, and many of their parents cannot afford to take time out to pick up their children, especially because some don't even have a car.

A mixed picture exists in low-performing districts with respect to provision of basic facilities to the community members. Even though Tumbleweed has experienced a large population increase in the past 15 years, the city has not built any new libraries or community parks since the 1970s. In fact, due to the severe budgetary situation, many of the branch libraries were forced to shut down or greatly reduce their hours. The last community park built in Tumbleweed was in 1978. Since then the city has grown by 160,000 people, nearly doubling its population. Desert View has a park and recreation center where children participate in after-school activities such as sports and crafts, and the center supervises and helps keep children off the street. However, these activities are limited.

Conclusion

The common thread that runs through these school districts and their communities is that they are all experiencing increased poverty and family problems—violence, gangs, drugs, alcohol, single parenthood. Communities need many more service programs than they currently operate to meet the needs of the children and families, and they are having a difficult time responding to the increasing demand of social, health, and psychological issues. Some do not know how to respond to the needs of the children, although they recognize that additional services are needed to meet the challenges. Poor economic situations, limited resources, and tight budgets are making it harder for them to provide help or improve needed services to the children and families. In most cases, schools lack health providers and counselors. Communities need more police officers and social workers and are overcrowded with families who need help in dealing with problems of violence, gangs, drugs, and alcohol.

However, even in the face of these pressing challenges, some communities and schools are making a concerted effort to meet the needs of the children and their families. There are places where different ethnic groups and social agencies, recognizing the importance of the children's well-being, cooperate in harmony. Many different community agencies and members hold positive attitudes about changes taking place in their communities and are working closely and collaboratively with schools and families. Such districts are making visible efforts to control the gang- and drug-related activities through various programs that motivate students and promote their self-esteem and self-confidence. These efforts are especially apparent and widespread in high-performing districts. Superintendents, teachers, principals, politicians, and members of different businesses are more visible and care about their schools and children. Child abuse prevention programs, and antigang and antidrug prevention efforts are widespread, and are being incorporated into the curriculum and school activities. Various types of health care coverage are provided to the children and their families. Teachers, counselors, and health providers are communicating, coordinating, and cooperating together. Children freely receive counseling services and are treated with respect. Parent education is emphasized and promoted, with various educational programs available. Many recreation and sports activities are available for children. Members of different ethnic groups work cooperatively, and no racial and ethnic tension is apparent.

Stable districts and their communities, however, do not appear to place as high a priority on providing services to children and families. These communities seem less sensitive towards the needs of the minority population. Translators seldom are available in meetings with limited English speaking parents. The communities lack adequate medical facilities, and families have to make an extra effort to receive primary care. For example, the family in one of these school districts had to go to the hospital emergency room to get a treatment for an ear infection, which could easily have been treated at a clinic or a doctor's office. Still, even in these districts, there are some worthy programs for children and families. Roosevelt, for example, is much better situated to provide social and health services to the children and families than it would have been without the nonprofit organization. It is an exemplary coordinated services agency that is working collaboratively with the school district to move into the schools.

School districts sharing similar demographic characteristics and challenges might benefit by adopting some of these promising programs. The district service center at Washington is centralizing the district and community services to provide comprehensive services for its students and families. Services from social, health, and counseling to after-

school programs are provided to the students and their families through the district comprehensive service center. This approach can be considered unique in providing services to children, even though there has been some controversy in the district in terms of the decision to build the multimillion dollar district center. Although these districts currently are in the stable performer category, their efforts may bear fruit in the years to come.

A district's ability to provide services is contingent on community support. When there is racial harmony and cooperation among different ethnic subcommunities, it is easier for schools to bring together the needed services to the children and families. Unfortunately, the low-performing districts often suffer from ethnic tension, factionalism, and lack of cooperation among different members of the community. They appear to hold a negative attitude and display insensitivity toward the need of the minority population, which in turn, has stifled cooperation among the different subcommunities. Without a mandate from the community, the public service agencies will not extend themselves to cooperate with a district. Thus, many services will be limited or not available to the children and families.

In general, very little effort has been made in low-performing districts. They either deny that problems exist or lack the commitment necessary to alleviate the problems. Even when there is recognition of the need for help, staff members may not know where or how to find it among a complex of agencies with vaguely defined mandates. However, Dominguez Hills is an exception to this general picture, as perhaps its lack of success is due to a time-frame problem (perhaps more time will have to elapse to see the positive effects of providing services) or other problems.

Tables 1, 2, and 3 display the extent and levels of four kinds of service efforts and programs for high-performing, stable, and low-performing school districts.

The data reviewed in this chapter suggest that there are both quantitative and qualitative differences in the services provided to the children and their families by the high-performing and low-performing school districts. Some of the districts in the stable category either could be districts in transition or simply districts that are stagnant and fall in between the two other categories due to their lack of capacity or commitment.

Table 1
Summary of Four Types of Service Programs for High-performing School Districts

	Social service	Health service	Psychological service	Other service
High-performing school districts	• have close working relationship with social workers and the police department • provide various prevention gang- and drug-related programs • provide child abuse prevention program • exercise strict disciplinary control for prevention of gangs and drugs • have strong social goals • have dedicated full-time police officer on campus • show cooperation from teachers, nurses, principals, and social service agencies	• provide free immunization and other health-related tests • enjoy good communication and cooperation between teachers and health service providers • emphasize children's physical well-being • inform communities regarding health related issues • give presentations on health issues • make referrals to health agencies • provide health education programs • have bilingual staffs in a health clinic	• receive support and psychological services from various community counseling agencies • provide various counseling services to minority children and their families • help students to build self-esteem through various counseling programs • have good communication between teachers and psychologists • hold a positive attitude and total commitment from school staff • supply translators • treat children with respect, affection, and care	• emphasize and promote parent education • offer various parent education programs on social issues • educate parents on health related issues • provide a variety of activities and programs for social skills, self-esteem • have numerous extracurricular and after-school activities • supply translators for meetings and events • have good park and recreation programs • offer library programs

table continues

	Social service	Health service	Psychological service	Other service
High-performing school districts (continued)	• get strong community support and have strong community linkage • display harmony and cooperation among different ethnic groups • have various business-sponsored programs • provide free and extensive day care services	• offer translator programs	• have mechanisms for resolving conflict	

Table 2
Summary of Four Types of Service Programs for Stable School Districts

	Social service	Health service	Psychological service	Other service
Stable school districts	• have little cooperation between police department and the schools • receive minimal social support from the community and community agencies • show insensitivity to minority/multilingual populations • suffer from factionalism and racial tension • have a few business-sponsored programs • offer limited day care services	• have limited health care and lack medical facilities • lack cooperation between districts and health agencies • have created different approaches to meet the needs of children • offer a few health related education programs	• provide counseling programs to children and families • receive some cooperation and psychological services from community agencies • provide talks to motivate children • show some communication between psychologists and teachers • make referrals to few agencies	• have a few parent education programs • provide several after-school /extracurricular programs • lack language assistance for limited English-speaking parents

Table 3
Summary of Four Types of Service Programs for Low-performing School Districts

	Social service	Health service	Psychological service	Other service
Low-performing school districts	• have unclear, strained relationships between social workers and the schools • lack social resources to deal with problems • show insufficient efforts to control crimes and lack police officers • make very few referrals to social agencies • ignore social problems • hold pessimistic views in solving problems • experience racial tension and distrust • have some social support from businesses • lack child care services	• provide very limited health services • show lack of communication and cooperation among health professionals • supply translators for some minority population groups • make very few referrals to health agencies • lack health professionals • lack health education programs	• provide limited psychological counseling services • lack counselors and psychologists • have no community counseling agencies working with schools • fail to link with and get support from community agencies • lack coordination, integration, and support	• offer some health- and social-related events and workshops for parents • display low parent involvement • provide very limited after-school and extracurricular activities • lack translators • display a mixed picture in basic community facilities • offer library programs

References

Center for the Study of Social Policy. (1992). *Kids count data book*. Washington, D.C.

Elementary Grades Task Force Report. (1992). *It's elementary*. Sacramento: California Department of Education.

Fanchel, D., Finch, S. J., & Grundy, J. F. (1992). *Serving the urban poor*. London: Praeger Publishers.

Gold, S. (1992). *Refugee communities: A comparative field study*. Newbury Park: Sage Publications.

Harry, B. (1992). *Cultural diversity, families, and the special education system: Communication and empowerment*. New York: Teachers College Press.

Jang, Y., & Mangione, P. (1994). *Transition program practices: Improving linkages between early childhood education and early elementary school*. Los Alamitos: Southwest Regional Laboratory.

Klein, A. G. (1992). *The debate over child care 1969-1990: A sociohistorical analysis*. Albany: State University of New York Press.

Los Angeles Educational Alliance for Restructuring Now. (1992). *For all our children*. Los Angeles.

Trueba, H. (Ed.) (1987). *Success or failure: Learning and the language minority student*. New York: Newbury House/Harper & Row.

Zimmerman, S. (1992). *Family policies and family well-being: The role of political culture*. Newbury Park: Sage Publications.